

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>8/22/00</i>
O.I.P.E. CLASSIFIER		59	835
FORMALITY REVIEW		<i>[Signature]</i>	9-29
RESPONSE FORMALITY REVIEW			11-16

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
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(Rev. 8/99)